İ	Effective October 1, 2001							20 7	09/05/01.3				
	. CLAIMS AS FILED - PART I (Column 1) (Column 2)							7	L ENTITY				R THAN
ı	TOTAL CLAI	MS						RATE	FE		_	RATE	FEE
- -	FOR		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC F		<u>-</u> -		SIC FE	~
	TOTAL CHARGEABLE CLAIMS		3	minus 20=		*		X\$ 9=	_		-	(\$18=	1.10.0
	INDEPENDENT CLAIMS			minus 3 =		*		X42=	 -				
	MULTIPLE DEF	PRESENT	RESENT				A42=		\dashv^{c}	R	X84= 	-	
	If the differen	is less than	ess than zero, enter "0"		a column 2		+140=		0	R +	280=	<u> </u>	
	* If the difference in column 1 is less than zero, enter "0" in co					Joidini Z		TOTAL	·	0		DTAL	
	(Column 1) (Column 2) (Column							SMALI	- ENTIT	r ol			THAN ENTITY
AMENDMENT A	A INCINITY OF	CLAIMS REMAINING AFTER AMENDMEN		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA	·	RATE	ADD TION/ FEE	\L		ATE	ADDI TIONA FEE
	Total	* 10	Minus	** 4	7	= /		X\$ 9=	1	Ó	X	\$18=	ree
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	Timorring	SENTATION OF I	MULTIPLE DI	EPENDENT	CLAIM		1	+140=	1	7	` 	280=	200,00
							L	TOTAL		OF OF	`		2/1 1
_	**************************************	(Column 1)		(Colum		(Column 3)	AI	ODIT. FEE	<u></u>	_ 10'	, ADDI	T. FEE,	200.00
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		R/	ATE	ADDI- TIONAL FEÈ
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·		(Column 1)		(Column	.2) (0	Column 3)	AD	DIT. FEE I	. ·	1011	ADDIT	:FEE L	·
7 1		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FO	T R SLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE]	RA	TE	ADDI- TIONAL FEE
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	Independent	*	Minus	***	=		\downarrow	(42=		1	X84		
لب	THISTPHESE	NTATION OF MU	ILTIPLE DEP	ENDENT CL	_AIM					OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											DDIT.	TAL	
1	he "Highest Numl	ber Previously Paid	For" (Total or	Independent) i	is the hig	hest number fo	und i	1 the appr	opriate box	in colu	ımn 1.	. – –	